١		,	١,	_	,
(b)	(3)
1	h	١	7	6	١

								•	EMPL	OYEE SERIAL NU	MBER
FITNESS REPORT											
											1
	TION A	/7 ast	1	(Fiest)	(Middle)	GENERAL 2. DA	L TE OF BIRTH	3. SEX	4. GR	ADE 5. SD	
1. NAME (Last) (First) (Middle) Collins Charles P.				1	/28/16	M	GS-	- I — — — — — — — — — — — — — — — — — —			
	6. OFFICIAL POSITION TITLE							ASSIGNMENT		RENT STATION	
Į .	General					DD/	DD/S&T/O/DD/S&T Hqs				
9. CI	HECK (X) TYP	E OF A	PPOINTMEN	т		10. C	HECK (X) TYPE	OF REPOR	₹ T		
X	CAREER		RESERVE		TEMPORARY		INITIAL			REASSIGNMENTS	UPERVISOR
		<u> </u>	NAL (See Ins	tructions	- Section C)	. X	ANNUAL			REASSIGNMENT	EMPLOYEE
	SPECIAL (Sp					10.7	SPECIAL (Spe			· · · · · · · · · · · · · · · · · · ·	<u> </u>
	ATE REPORT		1 O.P.			,	eporting per February 1			ah 1067	i.
	April 19	707			PERFORMA			ـر - 900.	T MOT	GII 1301	*
		D==4==	tana	f-o- v	vholly inadequate			isfactory.	A ratin	a in this category	· requires
w -	<u>Weak</u>	positiv	ve remedial	action.	The nature of the	action cou	uld range from	counseling.	, to furt	ther training, to p	yacing on
		•		-	or to separation						
Α-	Adequate	Performance Pe		s all requ	uirements. It is	entirely sa	tistactory ana	is characte	rized n	either by deticie	ncy nor
Р-	<u>Proficient</u>			ore than	satisfactory. De	sired resul	ts are being p	roduced in a	profic	ient manner.	1
-	Strong				zed by exceptions	•	-				
0 -	Outstanding	Perfor	mance is so	excepti	onal in relation to as to warrant spe	o requireme	ants of the wor	k and in co	mpariso	on to the perform	ance of
	. 7:	otners	doing simil	dr Work		CIFIC DU					<u> </u>
<u> </u>											3
mann	er in which e	emplove	e performs i	EACH sp	duties performed ecific duty: Con ited on their abili	sider ONL	Y effectivenes	s in perform	nance o	of that duty. All	cribes the employees
	IFIC DUTY N			7					· · · · · · · · · · · · · · · · · · ·		RATING
İ	Direct	e the		Staff.			F = F + F + F				LETTER
l	TATTECH	p mr		Juans							
<u> </u>				J							
SPEC	IFIC DUTY N										RATING LETTER
l			aff supp	ort to	CLA SIGIN	IT Offic	er and or	her Sen	ior A	gency	
	Officia	.ls.									S
SPEC	IFIC DUTY N	0.3									RATING
	Tric bo, ,	0. 0									LETTER
i										•	
						·					
SPEC	IFIC DUTY N	0.4									RATING LETTER
										RELEASE	
					**			DATE: D)EC ∠∪	10 /	
<u> </u>				•	<u></u>						
SPEC	IFIC DUTY N	0, 5									RATING
						•					
					en e						
SPEC	IFIC DUTY N	10. 6			Service of the servic			The second second		The state of the s	RATING
				· · · ›.			¥⊈ rather	No. of the second			LETTER
	1 0 JUL 19	0E7							: 1		
l'	T A JOF P		¬				- () () () () () () ()				<u> </u>
				OVER	ALL PERFORM	AANCE IN	CURRENT	POSITION			•
Take	1-12 2550-		i chout	Aba ampl	which influ	his a	- Mareivaness	- Lie cueres	-+ nasit	ion such as par-	RATING LETTER
Take into acco unt everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period,					(A) (A)						
parti plac	cular limitati a the letter i	ions or	talents. Bo itina box co	respond	your knowledge of ing to the stateme	of employe ent which i	e's overall pe most accuratel	erformance v reflects h	during is leve	the rating period l of performance.	, S
F		11 1114 1	"Hing #	, 10-p				,			and the second second second
6									_		1 1

SECRET

SECRET

SECT	TONC
3661	IUN L.

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

JUL 7 3 27 PM 67

This experienced officer continues to give a good account of himself. He has earned the rating given overleaf.

'l. ; :	BY EMPLOYEE				
	CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT				
21 June 1967	SIGNATURE OF EMPLOYEE				
2.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION				
-DATE	OFFICIAL TITLE OF SUPERVISOR				
6 JUL 1967	CIA SIGINT Officer				
3.	BY REVIEWING OFFICIAL				
COMMENTS OF REVIEWING OFFICE	IAL TEGRAL TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL				
No appropr	riate reviewing official.				
75 (1944) 15 (1944)					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE				

CERTIFICATION AND COMMENTS